

EXPRESS EV 36539731545

Rec'd PCT/PTO

16 MAY 2005

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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032
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| | | |
|---|-------------------------------|--|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | Attorney Docket Number | PU020460 |
| | First Named Inventor | Michael A. Pugel |
| | COMPLETE IF KNOWN | |
| | Application Number | / |
| | Filing Date | |
| | Group Art Unit | |
| <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing | OR | <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) |
| Examiner Name | | |

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHODS FOR CONTROLLING APPARATUSES HAVING AN EMERGENCY
ALERT FUNCTION**

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Country | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|---------|--------------------------|--------------------------|--------------------------|
| | | | | | YES | NO |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|--------------------------|---------------------------------------|--|
| 60/426,640 60/426,865 | 15 November 2002T 15 November 2002 | |

{Page 1 of 2}

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DECLARATION — Utility or Design Patent Application

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| Address | Two Independence Way | | |
| City | State | ZIP | |
| PRINCETON | NJ | 08540 | |
| Country | Telephone | Fax | |
| USA | 609 734 6834 | 609 734 6888 | |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

1-00

| | | | | |
|-----------------------------|------------------------------|----------------|-------------------------------|----------|
| Given Name | MICHAEL ANTHONY | | Family Name or Surname | PUGEL |
| Inventor's Signature | <i>Michael Anthony Pugel</i> | | Date | 11-17-03 |
| Residence: City | State | Country | Citizenship | |
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NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

| | | | | |
|-----------------------------|--------------|----------------|-------------------------------|--|
| Given Name | | | Family Name or Surname | |
| Inventor's Signature | | | Date | |
| Residence: City | State | Country | Citizenship | |
| | | | | |

Mailing Address

Mailing Address

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| City | State | ZIP | Country |
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☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

EXPRESS EV 365397215/AS

Rec'd PCT/PTO

16 MAY 2005

PTO/SB/81 (11-04)

Approved for use through 11/30/2005. OMB 0651-0035

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**POWER OF ATTORNEY
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INDICATION FORM**

| | |
|------------------------|---|
| Application Number | |
| Filing Date | |
| First Named Inventor | MICHAEL ANTHONY PUGEL |
| Title | METHODS FOR CONTROLLING APPARATUSES HAVING AN EMERGENCY ALERT FUNCTION |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | PU020460 |

I hereby appoint:

☒ Practitioners at Customer Number

Customer Number 24498

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
| | |
| | |
| | |
| | |
| | |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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Individual Name

Address THOMSON LICENSING INC.

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State

ZIP

Country

Telephone

609-734-6811

Fax

609-734-6888

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name HARVEY D. FRIED, REG. NO. 28,295

Signature

Date

12 May 2005

Telephone

609-734-6811

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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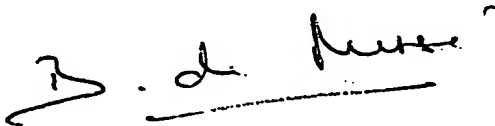
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F-92100 Boulogne-Billancourt
France

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Joseph S. Tripoli
Senior Vice President
Thomson Licensing Inc.
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Princeton, New Jersey 08540

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DATED this 15 day of March, in the year 2004.



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DATED this 17th day of March, 2004.

SIGNED



Joseph S. Tripoli
Sr. Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON Licensing S.A.

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David Fournier

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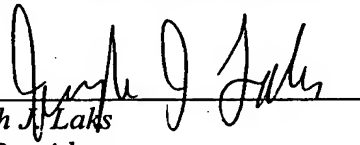
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DATED this 17 day of March, 2004.

SIGNED


Joseph J. Laks
Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON Licensing S.A.

WITNESS


David Fournier